# CONFERENCE ON DISARMAMENT

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LETTER DATED 22 MAY 1998 ADDRESSED TO THE SECRETARY-GENERAL OF THE CONFERENCE FROM THE PERMANENT REPRESENTATIVE OF EGYPT TRANSMITTING THE TEXT OF RESOLUTION WHA51.8, ADOPTED BY THE WORLD HEALTH ASSEMBLY ON 16 MAY 1998, ON THE ISSUE OF "CONCERTED PUBLIC HEALTH ACTION ON ANTI-PERSONNEL MINES"

With reference to my letter dated 3 February, 1998, concerning the resolution adopted by the Executive Board of the World Health Organization on the issue of "Concerted Public Health Action on Anti-Personnel Mines", please find enclosed herewith Resolution WHA51.8 adopted on 16 May, 1998, by the World Health Assembly on the same issue.

I would be grateful if you would circulate this resolution as an official document of the Conference on Disarmament.

(Signed) Mounir Zahran
Permanent Representative

GE.98-61796

**FIFTY-FIRST WORLD HEALTH ASSEMBLY** **WHA51.8**

Agenda item 20 16 May 1998

# Concerted public health action on anti-personnel mines

The Fifty-first World Health Assembly,

Noting with great concern the dramatic consequences of injuries caused by anti-personnel mines, which particularly affect civilian populations and are uniquely tragic, so that they deserve special attention;

Recalling the Ottawa Declaration of 5 October 1996, the Brussels Declaration of 27 June 1997, and noting the progress made by the international community towards a global ban on anti-personnel mines, as well as the relevant decisions and initiatives taken in other forums;

Recalling Article 6 of the Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction, adopted in Oslo on 18 September 1997, and opened for signature on 3 December 1997, which provides that assistance for the care and rehabilitation of mine victims and for mine awareness programmes may be provided, *inter alia*, through the United Nations system, international, regional or national organizations or institutions;

Recalling operative paragraph C.2 of resolution EB95.R17 on emergency and humanitarian action, which requests the Director-General "to advocate the protection of non-combatants and the setting-up of effective treatment and rehabilitation programmes for the victims of anti-personnel landmines, as well as the systematic management of delayed health effects of mental and physical injuries in situations of collective violence";

Recognizing the serious consequences for health caused by anti-personnel mines as they, *inter alia*, limit population mobility, prevent access to arable land, resulting in malnutrition, hamper access to health services, contribute to the spread of communicable diseases like poliomyelitis and hinder their eradication, and, lastly, generate significant psychosocial disorders;

Recognizing that a total ban on anti-personnel mines will be an important contribution to global public health;

Welcoming the participation of over 120 Member States in the Ottawa Treaty Signing Ceremony from 3 to 5 December 1997;

Recognizing that WHO should contribute to coordinated activities of the United Nations system against anti-personnel mines by developing public health programmes for anti-personnel-mine injury prevention and control,

1. DECLARES that damage caused by the use of anti-personnel mines is a public health problem;

2. URGES all Member States to sign and ratify the Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-personnel Mines and on their Destruction as soon as possible;

3. URGES governments of affected States to incorporate anti-personnel-mine injury prevention and assistance to victims, including treatment and rehabilitation, as a priority in national health plans;

4. URGES Member States to give due attention to the public health aspects of the Convention and provide the necessary resources to support implementation of the WHO plan of action on anti-personnel mines, bearing in mind the need for an integrated and sustainable approach;

5. URGES governments that have planted mines in the territories of other countries to provide the latter with the required maps and identification of the minefields they planted and to cooperate in minefield clearance in the countries concerned so as to avoid further injuries and deaths of civilians;

6. REQUESTS the Director-General, within the limits of available regular and extrabudgetary resources and in close cooperation with governments, appropriate organizations of the United Nations system and intergovernmental and nongovernmental organizations:

(1) to strengthen the capacity of affected States for the planning and execution of programmes for:

(a) better assessment of the effects of anti-personnel-mine injuries on health through the establishment or reinforcement of surveillance systems;

(b) the promotion of mine awareness and prevention programmes through health education, in cooperation with interested parties;

(c) strengthening and improvement of emergency and post-emergency management of anti-personnel-mine injuries, including treatment and rehabilitation, with special attention to psychosocial rehabilitation and within the context of integrated health service delivery;

(2) to support policy and programme planning by establishing, with other interested parties and as part of an integrated database for the United Nations system, a clearing-house for information on public health aspects of the use of mines.

Tenth plenary meeting, 16 May 1998
A51/VR/10

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